

2-PP-11 STEAM SLAB

State of California—Health and Welfare Agency

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CAD086510005		Manifest Document No. 1 of 1		2. Page 1 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Douglas Aircraft Co. 190th & Normandie Torrance, CA 90502		4. Generator's Phone 533-6677		6. US EPA ID Number CAD086510005		A. State Manifest Document Number 86234336		B. State Generator's ID HA-HQ-36-005698	
5. Transporter 1 Company Name J. C. Liquid Waste Disposal		7. Transporter 2 Company Name		8. US EPA ID Number CAD086510005		C. State Transporter's ID 709715		D. Transporter's Phone 213 268-3137	
9. Designated Facility Name and Site Address CHEM-TECK SYSTEMS, INC. 3650 E. 26th St. Los Angeles, CA 90023		10. US EPA ID Number CAT080033681		11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) a. Hazardous Waste Liquid NOS ORM-E NA9189		12. Containers No. Type 001 TT		13. Total Quantity 05000	
				14. Unit Wt/Vol G		1. Waste No. 221			
				15. Special Handling Instructions and Additional Information Guide #31 Use gloves, goggles, respirator - If rejected, return to DAC		K. Handling Codes for Wastes Listed Above 01			
				16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.					
Printed/Typed Name Donald C. Gerber		Signature <i>Donald C. Gerber</i>		Month Day Year 10/3/87					
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name W/000209 S. YBARRA		Signature <i>Santos Ybarra</i>		Month Day Year 10/3/87					
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Month Day Year					
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Jerry Godelek Chem-Tech Syst		Signature <i>Jerry Godelek</i>		Month Day Year 10/3/87					

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06-700-87-JCI-0324
21721-7918Department of Health Services
Substances Control Division
Sacramento, California

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4. Generator's Phone (533-6677)		6. US EPA ID Number		B. State Generator's ID HA-HO-36-005698		
5. Transporter 1 Company Name		7. US EPA ID Number		C. State Transporter's ID		
J. C. Liquid Waste Disposal		CA 0105180118367		D. Transporter's Phone 213 268-3137		
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID		
9. Designated Facility Name and Site Address		10. US EPA ID Number		F. Transporter's Phone		
CHEM-TECK SYSTEMS, INC. 3650 E. 26th St. Los Angeles, CA 90023		CA 110310133681		G. State Facility's ID CAT080033681		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a. Hazardous Waste Liquid NOS ORM-E NA9189		001 TT		05000	G	221
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above				
Alkaline Soap 5% Grease 2% Oil 3% Water 90%						
15. Special Handling Instructions and Additional information						
Guide #31 Use gloves, goggles, respirator - If rejected, return to DAC						
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Printed/Typed Name		Signature		Month Day Year		
Donald C. Gerber		sb		10/31/87		
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature		Month Day Year		
Printed/Typed Name		Signature		Month Day Year		
W/000209 S. YBARRA		Santos Ybarra		10/31/87		
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Month Day Year		
Printed/Typed Name		Signature		Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name		Signature		Month Day Year		